

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
10/639948

FILING DATE

11/11/05 CLAIMS

1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			3			
TOTAL DEP.			19			
TOTAL CLAIMS			12			

* 51	IND.	DEP.	* IND.	DEP.	* IND.	DEP.
	IND.	DEP.				
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